<u> </u>			Substitute for t	DETERMINA Form PTO-875	TION RECORD	alion unless il disp Applic	alion of Dockel	OF COLE
:	CLAIN	AS AS F	ILED - PAR				10 707	,422
. FOR		(Column 1) NUMBER FILED		(Column 2)	SMALL ENTI	T.Y OR	OTH	ER THAI L ENTITI
BASIC FEE (37. CFR 1.16(a)) TOTAL CLAIMS				NUMBER EXTRA	RATE	FEE	RATE	T
(37 CFR 1.16(C)) INDEPENDENT CLAIMS		minus 20 =		·	1 2 3	OR	11.116	s FR
(37 CFR 1.16(b))		minus 3 =		- <u>-</u>	x s 25 =	OR	x s 50.	 `
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))					x <u>s 100</u>	OR	x s 200	1
* If the difference in column 1 is less than zero, enter "0" in column 2.					1 +5180	OR	+ 360	
•	CLAIMS AS				TOTAL	OR	TOTAL	
·	(Column 1		(Colum					
¥ 5 1 αρ	. CLAIMS REMAININ AFTER	G	HIGHE	ST PRESENT	SMALL ENTITY	٠٠.	OTHER SMALL E	THAN
Total (31 CFR 1.16(c)) Independent U (31 OFR 1.16(c))	AMENOMEI	Mini	PREVIOU PAID FO	JSLY EXTRA	TION FEE	AL .	RATE	ADD- TIONAL
U (31 OFR 1.166)	4	Minu	32		x s 25 =	- - -	× 50 =	FEE
FIRST PRESE	YTATION OF MULT	IPLE DEPE		37 CFR 1 16(4)	x s 100=	1	(s 20Q	
	÷ .				+ s 180=		310	
	(Column 1) . CLAIMS		(Column	2) (Column 3)	. ADO'C FEE	OR A	OTAL DO'L FEE	
	REMAINING AFTER AMENDMENT	.	HIGHEST NUMBER PREVIOUS	R PRESENT	RATE ADDI-	7		
Total (37 CFR 1.16(d)	- TOMENT	Minus	PAID FOR	=	TIONAL FEE		RATE	ADDÍ TIONAL
Total (37 CFR 1.16(d)) Independent (37 CFR 1.16(b))		· Minus		= .	x s <u>100</u> =	OR X	50_	FEE ·
FIRST PRESENT	ATION OF MULTIP	LE DEPENO	PEHTCLAIM (37	CFR 1.16(d))	+ \$ 180=		200_	
					TOTAL ADO'L FEE	10	360.	
	(Column 1) CLAIMS	·	(Column 2)	(Column 3)		_ OR ADI	D'L FEE.	
	REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY	PRESENT EXTRA	RATE ADDI-	7 [WIE .	
Total (31 OFR 1.16(c))		Minus	PAID FOR	= -	TIONAL FEE		τί	NDDI- ONAL FEE
(17 CFR 1.16(6))	2.	Minus		=	x s 100	1	0 =	
FIRST PRESENTA	TION OF MULTIPLE	DEPENDE	NTCLUM (37C	CFR 1.16(d))	+ 2180=	·	200	
If the entry in col	umn 1 is less that	The sole:		ile "0" in column 3.	TOTAL	TOTA	160 ₌	
II the Highest No	imber Previously mber Previously	Paid For I Paid For I	IN COTUMN 2, WI IN THIS SPACE IN THIS SPACE	ile "0" in column 3. E is less than 20, ent is less than 3, enter		OR ADO'	L FEE	

If the "Highest Number Previously Paid For IN THIS SPACE is less than J, enter "J".

The "Highest Number Previously Paid For (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments and Trademark Office. U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS, SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.